

## SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

## 1. Article Addressed to:

The Attorney General  
Department of Justice  
Room B-103  
950 Pennsylvania Ave., NW  
Washington, D.C. 20530

## A. Signature

**X** Agent Addressee

## B. Received by (Printed Name)

## C. Date of Delivery

## D. Is delivery address different from item 1?

If YES, enter delivery address below:

 Yes No

2:05C49900-T  
SLC 6030

## 3. Service Type

 Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.

## 4. Restricted Delivery? (Extra Fee)

 Yes2. Article Number  
(Transfer from service label)

7005 1160 0002 2365 4341

Domestic Return Receipt

102595-02-M-1540

PS Form 3811, August 2001